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| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1 FY 2006   | 1.136(a) Docket Number (Optional) WYS-007.01 |  |
|---|--|--|
| (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R.   |  |  |
| Application Number 10/076,934-Conf. #3689   | Filed February 15, 2002                      |  |
| For AGENTS THAT SPECIFICALLY BLOCK CD28-MEDIATED SIGNALING AND USES THEREFOR  |  |  |
| Art Unit 1644   | Examiner I. I. Ouspenski                     |  |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): |  |  |
| Fee   | e Small Entity Fee                           |  |
|   | 120 \$60 \$                                  |  |
| Two months (37 CFR 1.17(a)(2)) \$45   | 450 \$225 \$                                 |  |
| X Three months (37 CFR 1.17(a)(3)) \$102  | 020 \$510 \$ 1,020.00                        |  |
| Four months (37 CFR 1.17(a)(4)) \$159   | 590 \$795 \$                                 |  |
| Five months (37 CFR 1.17(a)(5)) \$216   | 160 \$1080 \$                                |  |
| Applicant claims small entity status. See 37 CFR 1.27.  |  |  |
| A check in the amount of the fee is enclosed.   |  |  |
| Payment by credit card. Form PTO-2038 is attached.  |  |  |
| The Director has already been authorized to charge fees in this application to a Deposit Account.   |  |  |
| The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to  Deposit Account Number 06-1448, Ref.  WYS-007.01   |  |  |
| I am the applicant/inventor.  assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).   |  |  |
| x attorney or agent of record. Registration   |  |  |
| attorney or agent under 37 CFR 1.34.  Registration number if acting under 37 CFR 1.34   |  |  |
| /Charlene A. Stern-Dombal/  | January 25, 2007                             |  |
| Signature Date  |  |  |
| Charlene A. Stern-Dombal Typed or printed name  | (617) 832-1738<br>Telephone Number           |  |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.   |  |  |
| Total of forms are submitted.   |  |  |